



MILITARY DIVISION, STATE OF IDAHO
IDAHO BUREAU OF HOMELAND SECURITY

4040 W. GUARD STREET, BLDG. 600
BOISE, IDAHO 83705-5004

Pre-Disaster Mitigation (PDM)/Flood Mitigation Assistance (FMA) Project Letter of Intent

The purpose of this form is to establish your jurisdiction's interest in the competitive hazard mitigation grant programs provided by FEMA and to identify projects that are a priority for your jurisdiction to reduce or eliminate future emergency or disaster costs associated with natural hazards.

Applicant Type:		
<input type="checkbox"/> State Government	<input type="checkbox"/> Local Government	<input type="checkbox"/> Indian Tribe
<input type="checkbox"/> Special Purpose District	<input type="checkbox"/> Private Non-Profit Organization	<input type="checkbox"/> Other _____

Name/Address of Jurisdiction:

Contact Person:

Phone Number:

Email:

Cost of Project (estimated): \$

County of Jurisdiction:

1. What **Natural Hazard(s)** will your project address? _____

2. Describe the **Risk** from this hazard (what is the problem)? _____

3. Project Description (what do you intend to do to resolve the Hazards impact) _____

4. How will this project solve your disaster related problem? _____

HMGP Project Letter of Intent

5. Estimated quantifiable benefit of this project*: \$ _____

*This can include previous damages, future damages mitigated, and property value losses prevented.

6. Source of Local Share: _____ (at least 25% of estimated costs)

8. What is the estimated life of the project (in years)? _____

9. Is this project identified in the County Multi-Jurisdictional Hazard Mitigation Plan? (Please cite the page number(s) of the specific reference to the strategy and/or the specific project)
- _____

Please answer the following yes or no questions to determine if your **project** will be eligible for consideration for a Hazard Mitigation Grant. Does the project:

- | | | |
|--|------------------------------|-----------------------------|
| 1. Substantially reduces the risk of future damage, hardship, loss, or suffering from a hazard? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Address a problem that is repetitive or that poses a significant risk if left unsolved? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Contributes substantially to a long-term solution? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Provide cost effective protection over the expected project life? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Conforms to federal and state environmental regulations? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Have manageable future maintenance requirements? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Reflects the most practical, effective and environmentally sound solution from among all alternatives considered. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you have answered No to any of the above questions, your project may not be eligible for a Hazard Mitigation Grant.

Additionally, is your jurisdiction participating and in good standing in the National Flood Insurance Program (NFIP)?

☐ Yes ☐ No

Does your community have a FEMA approved All-Hazards Plan?

☐ Yes ☐ No

If either answer is **No**, your project can **not** be considered.

PLEASE RETURN THIS FORM NO LATER THAN: October 17, 2008

Return Address: State Hazard Mitigation Officer
Idaho Bureau of Homeland Security
4040 Guard St. Building #600
Boise, ID 83705-5004

This is NOT an application. You will be contacted and sent an application at a later date in the near future. If you have any questions, contact the Mitigation Program Staff.

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